

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>9/22/02</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>60500</i>	<i>9/5/00</i>
FORMALITY REVIEW		<i>105</i>	
RESPONSE FORMALITY REVIEW		<i>24</i>	

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	✓ 9/2/04
2	✓ 9/2/04
3	✓ 9/2/04
4	✓ 9/2/04
5	✓ 9/2/04
6	✓ 9/2/04
7	✓ 9/2/04
8	✓ 9/2/04
9	✓ 9/2/04
10	✓ 9/2/04
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy